
Street Address

Apt. No.

City

County

State and Zip

5.

First

Middle

Last

Street Address

Apt. No.

City

County

State and Zip

6.

First

Middle

Last

Street Address

Apt. No.

City

County

State and Zip

7.

First

Middle

Last

Street Address

Apt. No.

City

County

State and Zip

8.

First

Middle

Last

Street Address

Apt. No.

City

County

State and Zip

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116

Dated

Signature

County and state where signed

Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email: _____